

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

GILES S. PORTER, M.D., Director

Weekly Bulletin



STATE BOARD OF PUBLIC HEALTH

JOHN H. GRAVES, M.D., President

EDWARD M. PALLETTE, M.D., Vice President

GEORGE E. EBRIGHT, M.D.

JUNIUS B. HARRIS, M.D.

WM. R. P. CLARK, M.D.

GIFFORD L. SOBEY, M.D.

GILES S. PORTER, M.D.

Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912. Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. XI, No. 47

December 24, 1932

GUY P. JONES
EDITOR

Health and Health Teaching

"The greatest asset of a nation is the individuals which compose that nation, and the greatest asset of the individual is health."

"Without health all opportunities of endeavor are lost."

Health is man's most valuable possession. Without it he can not hold or enjoy anything else that falls to his lot or that he wins in the battle of life. Without it he is a burden to himself, and unless he possess marked compensating qualities, a burden to his friends and business associates.

Doubtless there are many people who have lost the fighting edge and are tired of life. There are others who are indifferent to life, or bored with life, or are unable to find in life any of the joys, pleasures, or rewards that make life worth while. And yet there seems to be a wide desire among people to live long. The avidity with which they grasp at cure-alls and short-cuts are cases in point. The love of life impulse which runs through all animated nature is continuously asking for recognition. If to live a little longer were merely an effort to lengthen the span of human existence without taking out of it the "stings and arrows," or adding to it a greater capacity for enjoyment or for useful employment, there would be very little incentive to work with this end in view; but, on the other hand, if by doing so we can raise the standard of health, prolong life and, incidentally, reduce human suffering and increase

human happiness and human efficiency, the endeavor will surely be worth while.

A glance at the record of preventive medicine for the past two decades should be enough to convince any fair-minded person that the latter results can be and are being achieved.

Good health is not a matter of chance or luck, and neither is bad health. They are both dependent upon fixed laws. As has been well said by Dr. Crombine: "The laws of health are as inexorable as the laws of gravitation; as exacting as eternal justice; as relentless as fate; and their violation is the beginning and cause of disease, suffering and sin." The real, solid, durable satisfactions of life are what we should be instructed in, to have and to hold; and health is the indispensable foundation on which they rest. The whole structure of domestic joy, social pleasure, professional success, or a useful and honorable career is erected on it. How essential, therefore, that all else shall be subordinated to it. Health is a capricious imp, however, and must be sought for with the same intelligence and earnestness of purpose that we exert in our endeavors to attain success in any other department of human activity. With the individual, it is largely a personal affair, but with the masses it depends on an intelligent public action. The control of preventive diseases; the conservation of child life; the education of the people in disease; sanitation and disease causation and preventive medi-

cine are matters which must be treated en masse if we are to get the best results.

The prolongation of life has interested people of all ages of the world but our methods have changed materially. We no longer fritter away our time and energies searching for the fountain of health or the elixir of life, but we study the individual, carry the matter up to the laboratory, and seek for the cause of decay and the means of postponing it. We study the human machine and look for evidence of the weak parts and, when found, we try to strengthen them or remove the extra strain to which they may be subjected. We try to apply such knowledge as we have for the best interests of the organisms.

From figures published by the Bureau of the Census we have been gradually adding year after year to the average of life time until at the present time every white male child, alive at birth, has an average length of life remaining of 50.23 years and every white female child of 53.62 years, and if we keep them alive to the end of the first year of life, their chances of life would be 56.88 and 59.21 years, respectively. With the application of such knowledge as we already possess—on the authority of Prof. Irving Fisher of Yale—we could add fifteen years to the average of life.

It is estimated that if preventable diphtheria were eliminated as one of the health hazards, at least one-half year could be added to human life; seven months by the elimination of preventable typhoid; two years by the elimination of preventable accidents. On conservative grounds, at least eight years could be added to the average of human life by merely providing or applying conditions which would insure for the individual pure air, pure water and good food at all times.

It is interesting to note that the results, such as lengthening the span of human existence, conserving the vital forces, decreasing human ills, alleviating human suffering and bettering all those conditions which have to do with life efficiency, have been brought about by rational application of scientific principles and not by blind adherence to the teaching of any sect, cult, fad or pathy. In this connection the all important thing to remember is that the further attainment of this is a present possibility and does not depend upon the uncertain accomplishment of the future. The trouble is not the lack of knowledge but the lack of intelligent application of such knowledge as we already possess.

A child will learn three times as fast when he is in tune, as he will when he is dragged to his task.—Locke.

QUANTITIES OF FOODS IN COLD STORAGE

At the end of September of this year, nearly 70,000,000 pounds of foodstuffs were held in cold storage warehouses in California. More than half of this consisted of fresh fruits—mostly apples and pears. Relatively small amounts of other foodstuffs were held in storage. At that time, there were 1,669,854 pounds of egg meat and 998,700 cases of eggs held in cold storage. It should be understood that cold storage is useful in the preservation of foodstuffs, enabling dealers to effect a more equal distribution over a longer period of time than would be possible without cold storage facilities. Many people regard cold storage as a vehicle for raising prices of food products when they are not available in fresh state, but this is a negligible factor. Actually, cold storage properly conducted is of great value in making valuable foodstuffs available at seasons of the year when they are needed greatly. Following are the principal items that were held in cold storage warehouses throughout the State on September 30, 1932:

Fresh apples -----	22,167,053 pounds
Pears -----	19,459,210 pounds
Miscellaneous fresh fruits -----	4,285,988 pounds
Cheese -----	2,900,094 pounds
Meats -----	2,085,558 pounds
Dried fruit -----	2,083,056 pounds
Onions -----	1,963,722 pounds
Egg meat -----	1,669,855 pounds
Butter -----	1,597,405 pounds
Fish -----	1,443,651 pounds
Poultry -----	1,405,065 pounds
Frozen fruit -----	1,400,769 pounds
Nuts and nutmeats -----	1,131,467 pounds
Grapes -----	1,033,199 pounds
Citrus fruits -----	939,198 pounds
Eggs -----	998,700 cases

One of the most important lessons that we should appreciate is the great complexity and the vast scope of the field of public health. It is not a definite science but comprises a great body of knowledge about as broad as experimental science itself. For that reason the study of public health should be excellently adapted for general educational purposes. In this field, not only are the fundamentals of practically every laboratory science applied, but here is ample opportunity for the study of classics, the humanities, social problems and economics; for all civilizations have been profoundly influenced by problems of health and disease.—D. J. Davis, *Illinois Medical Journal*, November, 1929.

THE NATIONAL INSTITUTE OF HEALTH

The National Institute of Health is the research center of the U. S. Public Health Service. Before May, 1930, the work of the institute was carried on under the name of the Hygienic Laboratory of the United States Public Health Service. Through the provisions of a bill introduced by Senator Joseph E. Ramsdell, at that time U. S. Senator from Louisiana, the scope of the Hygienic Laboratory was broadened greatly and its name was changed to the National Institute of Health. Since that time Mr. Ramsdell has become executive director of the institute. Dr. George W. McCoy and his associates, who have been in the Hygienic Laboratory for many years, continue their services under the National Institute of Health. The conference board of the institute is an unofficial voluntary organization of public spirited men who lend their services to assist the Public Health Service to perform its important work in the conservation of public health. Under the present organization of the institute, it is able to accept gifts and benefactions which must be sent to the treasurer of the United States and credited as gifts to the National Institute of Health. Funds so contributed will be expended by the government in accordance with the expressed wishes of the donors. The legal restrictions that have been thrown around such expenditures assure donors that their contributions will be devoted to the purpose intended without any deductions whatsoever for commissions or overhead.

The Hygienic Laboratory came into existence in New York in 1887 but it was transferred to Washington and in 1901 Congress passed an act establishing it as a separate institution under the Public Health Service. It was charged with the "investigation of infectious and contagious diseases and matters pertaining to the public health." In spite of limited financial support, its scientific staff made extremely valuable discoveries relative to such diseases as malaria, hookworm, pellagra, tularemia, undulant fever, psittacosis, typhus, and Rocky Mountain spotted fever. It also has accomplished valuable work in the standardization of drugs and in the solution of fundamental chemical problems.

The institute maintains the same relations toward the Public Health Service that the Hygienic Laboratory has always maintained. The scope of its activities is broadened greatly, however, under its recent reorganization. The institute still receives appropriations by Congress but it is now enabled to receive support from other sources and thereby accomplish a much greater amount of work than was possible under its former limited support. The work of the institute has been of particular value to California,

as some of its discoveries have been especially valuable in the control of certain communicable diseases in this State. Among these may be mentioned tularemia, psittacosis, typhus, Rocky Mountain spotted fever and plague. The importance of research in public health is unquestionable. Without the accomplishments that have been made in this institution, as well as in countless other research laboratories throughout the country, it would have been impossible to develop the high standards in public health service which now prevail.

SAFETY LIES IN CERTIFIED MILK

The Medical Milk Commissions of Alameda and San Francisco counties have issued a circular letter to physicians, dentists, dietitians, public health nurses and others who are interested in the provision of a safe raw milk. The letter is issued under the signatures of Dr. Ina M. Richter, secretary of the San Francisco County Medical Milk Commission, and Dr. Alvin Powell, secretary of the Alameda County Medical Milk Commission. Attention is drawn to the reduced prices of this product and also to the various safeguards to which certified milk is subjected before it reaches the consumer. The following outline of these safeguards is presented:

1. Certified milk is produced and distributed under the personal supervision of a commission of physicians appointed by the Medical Association of each county.
2. Medical Supervision of Employees:
 - A. Each employee is given a complete physical examination every six months to insure that he is in good health.
 - B. Frequent laboratory examinations are made to detect carriers of milk-borne disease.
 - C. Each employee is immunized against typhoid fever once every two years and vaccinated against smallpox.
3. Veterinary and Sanitary Supervision:
 - A. Each animal is given a physical inspection twice each month.
 - B. Each animal must pass frequent tests for tuberculosis and Bangs abortion disease.
 - C. The milk is regularly tested to insure a product of uniform chemical composition and free from disease-producing organisms.
 - D. The dairy is of approved construction and maintained in a sanitary condition. All equipment is sterilized under steam pressure.
4. Handling of Milk Until Reaching Consumer:
 - A. The outside cap is dated and protects the pouring lip of the bottle.
 - B. The milk is kept on ice until it is delivered to the customer.

LIST OF DISEASES REPORTABLE BY LAW

ANTHRAX	OPHTHALMIA NEONATORUM
BERI-BERI	PARATYPHOID FEVER
BOTULISM	PELLAGRA
CHICKENPOX	PLAGUE
CHOLERA, ASIATIC	PNEUMONIA (Lobar)
COCCIDIOIDAL GRANULOMA	PSITTACOSIS
DENGUE	RABIES (Animal)
DIPHTHERIA	RABIES (Human)
DYSENTERY (Amoebic)	RELAPSING FEVER
DYSENTERY (Bacillary)	ROCKY MOUNTAIN
ENCEPHALITIS (Epidemic)	SPOTTED (or Tick) FEVER
ERYSIPELAS	SCARLET FEVER
FLUKES	SEPTIC SORE THROAT
FOOD POISONING	SMALLPOX
GERMAN MEASLES	SYPHILIS*
GLANDERS	TETANUS
GONOCOCCUS INFECTION*	TRACHOMA
HOOKWORM	TRICHINOSIS
INFLUENZA	TUBERCULOSIS
JAUNDICE (Infectious)	TULAREMIA
LEPROSY	TYPHOID FEVER
MALARIA	TYPHUS FEVER
MEASLES	UNDULANT (Malta) FEVER
MENINGITIS (Meningococcic)	WHOOPING COUGH
MENINGITIS (Cerebrospinal)	YELLOW FEVER
MUMPS	

QUARANTINABLE DISEASES

CEREBROSPINAL MENINGITIS (Epidemic)	POLIOMYELITIS
CHOLERA ASIATIC	SCARLET FEVER
DIPHTHERIA	SMALLPOX
ENCEPHALITIS (Epidemic)	TYPHOID FEVER
LEPROSY	TYPHUS FEVER
PLAGUE	YELLOW FEVER

* Reported by office number. Name and address not required.

MORBIDITY***Diphtheria.**

64 cases of diphtheria have been reported, as follows: Fresno County 1, Fresno 1, Kern County 2, Los Angeles County 7, Burbank 7, Long Beach 3, Los Angeles 15, Pasadena 1, Santa Monica 1, Merced County 2, Merced 1, Napa County 1, Orange County 3, Orange 1, Santa Ana 2, Riverside County 3, San Bernardino County 1, San Diego 1, San Francisco 2, Palo Alto 3, Yreka 1, Tulare County 5.

Influenza.

1271 cases of influenza have been reported. Those communities reporting 10 or more cases are as follows: Alameda 74, Berkeley 48, Oakland 38, Fresno County 17, Kern County 36, Los Angeles County 52, Huntington Park 11, Long Beach 37, Los Angeles 240, Pasadena 11, Fort Bragg 41, Merced County 14, Orange County 11, Anaheim 45, Huntington Beach 11, Santa Ana 16, Lincoln 10, Riverside County 74, San Bernardino County 64, San Francisco 126, San Luis Obispo County 11, Paso Robles 35, Santa Clara

* From reports received on December 19th and 20th for week ending December 17th.

County 37, Siskiyou County 14, Stanislaus County 11, Tuolumne County 22.

Measles.

27 cases of measles have been reported, the cases being scattered over the State.

Scarlet Fever.

111 cases of scarlet fever have been reported. Those communities reporting 10 or more cases are as follows: Los Angeles 29.

Whooping Cough.

181 cases of whooping cough have been reported. Those communities reporting 10 or more cases are as follows: Oakland 10, Los Angeles County 26, Long Beach 12, Los Angeles 17, San Diego 18, San Francisco 26.

Smallpox.

One case of smallpox from Los Angeles has been reported.

Typhoid Fever.

8 cases of typhoid fever have been reported, as follows: Fresno County 1, Los Angeles County 1, Riverside County 1, Sacramento County 1, Colorado 1, San Francisco 1, San Joaquin County 1, California 1.**

Meningitis (Epidemic).

One case of epidemic meningitis from Sacramento has been reported.

Poliomyelitis.

3 cases of poliomyelitis have been reported, as follows: Long Beach 1, Los Angeles 2.

Trichinosis.

One case of trichinosis from Oakland has been reported.

Undulant Fever.

2 cases of undulant fever have been reported, as follows: Alhambra 1, San Diego 1.

Septic Sore Throat.

2 cases of septic sore throat have been reported, as follows: Paso Robles 1, Yreka 1.

** Cases charged to "California" represent patients ill before entering the State or those who contracted their illness traveling about the State throughout the incubation period of the disease. These cases are not chargeable to any one locality.

U C MEDICAL SCHOOL
LIBRARY
PAARNASSUS & THIRID A
SAN FRANCISCO CALIF